

ENCOUNTER KEYS

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AHCCCS FFS Nursing Facility Rates



Rates for Nursing Facilities Updated

Effective for dates of service on and after 2/1/04, the Fee-for-Service Nursing Facilities (NF) rates will be increased 4%. Rate schedules for NF are shown below and can also be found on the AHCCCS website at: (www.ahcccs/PlansProviders/ProcRateCodes/FeeSchedules)

Effective 10/01/2003 through 01/31/2004

Level of Care	<u>Urban</u>	<u>Rural</u>
Level 1	\$108.19	\$105.30
Level 2	\$119.35	\$115.84
Level 3	\$143.10	\$138.55

AHCCCS FFS Nursing Facility Rates **Effective 02/01/2004 through 09/30/2004***

Level of Care	<u>Urban</u>	<u>Rural</u>
Level 1	\$112.54	\$109.53
Level 2	\$124.10	\$120.46
Level 3	\$148.72	\$144.01

*Adjusted for inflation and liability insurance

ALTERNATIVE PHARMACY SCREEN

Effective for the February cycle, valid Redbook or MediSpan National Drug Codes (NDC) encounter read has been implemented. If you still have Pharmacy encounters pending for the error code N004-NDC Code Not on File, verify that the NDC's are valid Redbook or MediSpan codes. If valid, submit the information to the Encounter Unit for inclusion into the database. The error code is now sanctionable.

The information needed is as follows:

- ◆ NDC number (which is identifying the product)
- ◆ Quantity
- ◆ Price
- ◆ Using either RedBook or MediSpan, please supply year of the book, and page number.

UPDATES

Provider Type

Effective 01/01/2003, procedure code 27825 (Closed Treatment Of Fracture Of Weight Bearing Articular) has been added to Provider Type 10 (Podiatrist).

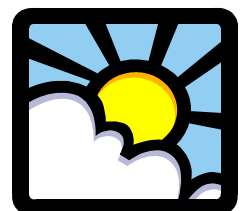
Effective 07/01/2003 the following procedure codes have been added to Provider Type 14 (Physical Therapist). **[Note: certification in Clinical Electrophysiologic physical therapy will be required.]**

95860 - 95864 - Needle Electromyography; Four Extremities With Or Without Related Paraspinal Areas
 95867 - Needle Electromyography; Cranial Nerve Supplied Muscle(s), Unilateral
 95868 - Needle Electromyography; Cranial Nerve Supplied Muscles, Bilateral
 95869 - Needle Electromyography; Thoracic Paraspinal Muscles (Excluding T1 or T12)
 95870 - Needle Electromyography; Limited Study Of Muscles In One Extremity
 95872 - Needle Electromyography Using Single Fiber Electrode, With Quantitative
 95875 - Ischemic Limb Exercise Test With Serial Specimen(s) Acquisition Muscle(s)
 95900 - Nerve Conduction, Amplitude And Latency/Velocity Study, Each Nerve; Motor without F-wave study
 95903 - Nerve Conduction, Amplitude And Latency/Velocity Study, Each Nerve Motor with F-wave study
 95904 - Nerve Conduction, Amplitude And Latency/Velocity Study, Each Nerve Motor with sensory
 95920 - Intraoperative Neurophysiology Testing, Per Hour (List separately)
 95921 - Testing Of Autonomic Nervous System Function; Cardiovagal Innervation
 95922 - Testing Of Autonomic Nervous System Function; Vasomotor Adrenergic Innervation
 95923 - Testing Of Autonomic Nervous System Function; Sudomotor,
 95925 - Short-Latency Somatosensory Evoked Potential Study, Stimulation of any/all peripheral nerves or skin sites
 95926 - Short-Latency Somatosensory Evoked Potential Study, Stimulation in lower limbs
 95927 - Short-Latency Somatosensory Evoked Potential Study, Stimulation in the trunk or head
 95930 - Visual Evoked Potential (Vep) Testing Central Nervous System,
 95933 - Orbicularis Oculi (Blink) Reflex, By Electrodiagnostic Testing
 95934 - H-Reflex, Amplitude And Latency Study; Record Gastrocnemius/Soleus Muscle
 95936 - H-Reflex, Amplitude And Latency Study; Record Muscle Other Than Gastrocnemius/Soleus Muscle
 95937 - Neuromuscular Junction Testing (Repetitive Stimulation, Paired Stimuli)

HCPCS

Effective 10/01/2002 AHCCCS Medical Management has approved the use of HCPCS codes for IUDs, eliminating the need for providers to bill with NDC codes for FFS claims. Rates have been established as follows:

J7300 Copper (Paraguard)	\$309.60
J7302 Levonorgestrel-releasing (Mirena)	\$355.50
S4989 Contraceptive intrauterine device (Progestacert)	\$115.04



Place Of Service (POS)

- ◆ POS 22 (Outpatient Hospital) effective 01/01/2003 has been added to the procedure code 4900 (Exploratory Laparotomy, Exploratory Celiotomy With Or With Biopsy(s))
- ◆ POS 23 (Emergency Room – Hospital) effective 01/01/2003 has been added to procedure code 26765 - Open Treatment Of Distal Phalangeal Fracture, Finger Or Thumb
- ◆ POS 23 (Emergency Room – Hospital) effective 01/01/2003, has been added to the procedure code 46050 (Incision And Drainage, Perianal Abscess, Superficial)
- ◆ POS 23 (Emergency Room – Hospital) effective 01/01/2003, has been added to the procedure code 46050 (Incision And Drainage, Perianal Abscess, Superficial)
- ◆ POS 23 (Emergency Room – Hospital) effective 01/01/2003, has been added to the procedure 265373 (Injection Procedure For Extremity Venography)
- ◆ POS 24 (Ambulatory Surgical Center) effective 01/01/2000 has been added to procedure codes G0260 - Injection Procedure For Sacroiliac Joint; Provision Of Anesthetic and 27096 - Injection Procedure For Sacroiliac Joint, Arthrography
- ◆ POS 31 (Skilled Nursing Facility) And 32 (Nursing Facility) effective 01/01/2003 have be added to the following procedure codes:
90816 – 90822 (Individual Psychotherapy, Insight Oriented, Behavior Modifying)

FluMist

Due to the shortage of injectable influenza vaccine, AHCCCS will cover the intranasal influenza vaccine from November 1, 2003 through January 31, 2004. The vaccine is marketed under the name of "FluMist". AMA's CPT provides a code for this service, 90660 (Influenza Virus Vaccine, Live, for Intranasal Use). Administration should be billed with AMA's CPT code of 90473 (Immunization Administration By Intranasal Or Oral Route).



DILEMMAS

For the months January and February, the following error code conditions are not subject to sanction:

- ◆ A950 - Data Gathering Error (Pending encounters using the Revenue codes 183 and 185 will not be sanctioned due to an AHCCCS valuation issue. This only effects encounters with Dates of Service on and after 10/01/2003.)
- ◆ A951 - Force Pend for Contractor Corrections
- ◆ F100 - Procedure Code Missing or Invalid (AHCCCS coding needs to include new format of NNNNA)
- ◆ P340 - Provider Specific Rate Not On File For DOS (Only for Nursing homes billing therapy services)
- ◆ S385 - Service Units Exceed Maximum Allowed for **8XXXX** procedure codes
- ◆ S386 - Maximum Anesthesia Units Exceeded (Service units less than twice the limit)
- ◆ V398 - Procedure Code Must Be A Valid HCPC Format of NNNNA (AHCCCS coding needs to include new format of NNNNA)

Edit Updates

Z220

A logic error was found in hard encounter error Z220, prescribing provider ID missing or invalid. The logic error has allowed missing prescribing provider IDs to bypass the edit. Reporting prescribing provider ID on pharmacy encounters is required. The logic error should be corrected soon. Please review your pharmacy prescribing provider ID submissions. Missing prescribing provider IDs will result in pended encounters if not reported. As soon as the logic error has been corrected you will be notified.

A900

Due to a recent problem in reported health plan paid amount, the soft encounter errors A900 and A901, unreasonable health plan paid amount, are being modified to identify significant differences ($\pm 500\%$ and $\pm 250\%$, respectively) between the AHCCCS fee schedule and the health plan paid amount. It is expected that the A900 error will be changed to hard effective July 1, 2004. The A901 error may be changed to hard at a later date.



AHCCCS
DIVISION OF HEALTH CARE MANAGEMENT
DATA ANALYSIS & RESEARCH UNIT
Encounter File Processing Schedule
April 2004—September 2004

FILE PROCESSING ACTIVITY	April 2004 Sat	May 2004 Sat	June 2004 Sat	July 2004 Sat	August 2004 Sat	Sept. 2004 Sat
Deadline for Corrected Pended Encounter and New Day File Submission to AHCCCS	4/10/2004 5:00 AM	5/8/2004 5:00 AM	6/5/2004 5:00 AM	7/10/2004 5:00 AM	8/7/2004 5:00 AM	9/4/2004 5:00 AM
Work Days for AHCCCS	6	6	6	6	6	6
Encounter Pended and Adjudication Files Available to Health Plans	Tue 4/20/2004	Tue 5/18/2004	Tue 6/15/2004	Tue 7/20/2004	Tue 8/17/2004	Tue 9/14/2004
Work Days for Health Plans	18	12	12	18	12	13

NOTE:

1. This schedule is subject to change. If untimely submission of an encounter is caused by an AHCCCS schedule change, a sanction against timeliness error will not be applied.
 2. Health Plans are required to correct each pending encounter within 120 days.
 3. On deadline days, encounter file(s) must arrive at AHCCCS by 5:00 a.m.
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